

## **GOVERNMENT OF GUAM**

FY2026 - SELF-INSURED GROUP HEALTH INSURANCE PROGRAM RATES

Actives - Bi-Weekly Rates | Retirees - Semi-Monthly Rates



MEDICAL, PHARMACY & VISION RATES					
	HEALTH SAVINGS ACCOUNT (HSA)				
	SELECTCARE - HSA2000				
PLAN	PLAN CLASS EMP/RET GOV TOTA				
HSA ACTIVE		\$2.04	\$159.25	\$161.29	
	II	\$45.08	\$277.50	\$322.58	
	III	\$36.21	\$229.92	\$266.13	
	IV	\$58.83	\$376.66	\$435.49	
HSA RETIREE	Î	\$2.21	\$434.62	\$436.83	
	l II	\$48.84	\$824.82	\$873.66	
	III	\$39.23	\$511.18	\$550.41	
	IV	\$63.73	\$932.24	\$995.97	
PREFERRED PROVIDER ORGANIZATION (PPO)					

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SELECTCARE - PPO1500					
PLAN	CLASS	CLASS EMP/RET GOV		TOTAL	
Æ	Į.	\$77.36	\$313.43	\$390.79	
PPO ACTIVE	II	\$193.51	\$588.07	\$781.58	
PO /	III	\$145.71	\$499.10	\$644.81	
<u> </u>	IV	\$239.13	\$816.01	\$1,055.14	
RETIREE	, B	\$83.81	\$974.58	\$1,058.39	
	II	\$209.64	\$1,907.14	\$2,116.78	
PPO RE	=	\$157.8 <b>5</b>	\$1,175.72	\$1,333.57	
<u>ā</u>	IV	\$259.06	\$2,154.07	\$2,413.13	

ed in Medicare A & 3
the government of Guam
, )OA Circular 2024-008].

**RETIREE SUPPLEMENTAL PLAN (RSP)** 

SELECTCARE - RSP				
PLAN	CLASS	RETIREE	GOV TO1	
RSP	l I	\$0.00	\$247.46	\$247.46
	lla	\$0.00	\$494.93	\$494.93
	IIb	\$25.00	\$1,155.03	\$1,180.03
	III	\$25.00	\$423.61	\$448.61
	IVa	\$25.00	\$1,401.96	\$1,426.96
	IVb	\$25.00	\$1,401.96	\$1,426.96

DENTAL RATES					
	DENTAL				
	NETCARE - DENTAL 1500				
PLAN	CLASS	EMP/RET	GOV	TOTAL	
DENTAL ACTIVE	L	\$8.77	\$14.32	\$23.09	
	, II	\$28.38	\$21.27	\$49.65	
	111	\$22.78	\$17.63	\$40.41	
DE L	IV	\$37.29	\$28.53	\$65.82	
DENTAL RETIREE	Î	\$9.05	\$15.97	\$25.02	
	II	\$30.14	\$23.65	\$53.79	
	III	\$24.19	\$19.59	\$43.78	
	IV	\$39.59	\$31.71	\$71.30	

	HSA, PPO & DENTAL CLASSES			
TAL	CLASS I	Subscriber Only (No Dependents)		
& DEN	CLASS II	Subscriber + Spouse (Domestic Partner) Only		
CAL & DE	CLASS III	Subscriber + Child/ren Only		
MEDICAL & DENTAL CLASSES	CLASS IV	Subscriber + Dependents (Spouse/Domestic Partner & Child/ren)		
	RSP CLASSES			
MEDICAL RSP	CLASS I	RSP Subscriber Only		
	CLASS IIa	RSP Subscriber + RSP Spouse/Domestic Partner (Medicare A & B Both Enrolled)		
	CLASS IIb	S IIb RSP Subscriber + Non-Medicare Spouse/Domestic Partner		
EDIC	CLASS III	RSP Subscriber + Non-Medicare Child/ren		
W	CLASS IVa	RSP Subscriber + Dependents (Spouse/Domestic Partner enrolled in Both Medicare A & B + Non- Medicare Child/ren)		
	CLASS IVb	RSP Subscriber + Dependents (Non-Medicare Spouse/Domestic Partner + Child/ren)		

<sup>\*</sup>Medical rates include gym benefit.

**EDWARD M. BIRN,** Director Department of Administration

August 29, 2025

DATE

<sup>\*</sup>Subscribers with unpaid premiums from prior plan years are not eligible to enroll, including as dependents, until balances are cleared.

<sup>\*</sup>Please check your payroll deductions and report any issues promptly.